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CONFIRMATION NO. 1557

Bib Data Sheet

SERIAL NUMBER 10/604,558	FILING DATE 07/30/2003 RULE	CLASS 198	GROUP ART UNIT 3651	ATTORNEY DOCKET NO. 2223.0
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APPLICANTS

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** CONTINUING DATA ***** NONE *DR*

** FOREIGN APPLICATIONS ***** NONE *DR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/07/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>DR</i>	STATE OR COUNTRY LA	SHEETS DRAWING 5	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 4
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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